Fielder and Groups	Under the Paperwick Reduction Act of 1995 on persons are mortaled in the Paperwick Office; U.S. DEPARTMENT OF COMMISSION												
Titilia yazi kitiki	DATELY ADDITION OF THE PROPERTY OF THE PROPERT											control númber.	
	Substitute for Form PTO-875								Application or Docket Number				
										10	11/00/	17	
		CLAIMS AS FILED PART I (Column 2)						SMALL ENTITY			OTHER THAN		
	r	(3111111	CRITIT	OR Tj	SMAL	LENTITY	
		ASIC FEE	, RU	MDER FILE	D NO.	ABER EXTRA	┨┝	RATE	FEE	4	RATE	FEE	
	10	OTAL CLAIMS					┨┝		-	OR		1	
	TK N	7 CFR 1.16(c)) DEPENDENT C	LAUS	minus 3 =				<u></u>		J o≈	x \$e		
	-	7 CFR 1.16(0))						<u> </u>		OR	X 5		
	<u> </u>	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								OR	+1		
	* If the difference in column 1 is less than zero, enter "O" in column 2.							FOTAL .		OR	TOTAL	 	
	1	CLAIMS AS AMENDED - PART II									:	L	
	1	(Cotumn 1) (Cotumn 2) (Cotumn 3)									OTHER THAN		
•		ď	CLAIMS		HIGHEST	(Cotumn 3)		SMALL	ENTITY	OR 1	SMALL	ENTITY	
:	J.E	1	REMAINING AFTER		MAMBER PREVIOUSLY	PRESENT	'	RATE	ADDI- TICNAL	l	FATE	ADDI-	
	ENOME	Total (D7 CFR 1.16(d)	MENDMENT	Minus	PAID FOR	+.	 	200	FEE	ļ.: ·		TIONAL"	
	18	Independent	1. 4.0	Minus	73	12	× 5.	25.	2	OR	71.20	·>	
· · .	A A		1.7		1-4		X 5/	100.		OR	x 2000.		
	F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (37 CFR 1.15(d))						180.		OR	+,36Q	7	
	غ ا	8/4/25						AL L FEE		OR	TOTAL ADOL FEE		
		5/12/05	(Column 1)		(Cotumn 2)	(Column 3)				•			
		/	CLAIMS REMAINING		HIGHEST	PRESENT.		ATE					
•	N	··· · · ·	AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA	"	AIE	ADOI- TIONAL		RATE	ADDI-	
	ENDMENT	Total prominen	93	Minus	99	=	\		FEE			FEE	
	EN I	Independent Ø7 OFR (.16(b))	id	Minus	" d	-	X \$		-,	OR	X \$=		
-	₹	FIRST PRESENT	TATION OF MULTIPA	E DEDEVO	<u> </u>		× 5_			OR	X 8=		
	-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.16(d))								OR	+ 5 = -		
										OR	ADO'L FEE	·	
1		(Column 1) (Column 2) (Column 3)							•		į		
	ENT		REMAINING AFTER AMENDMENT	·	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R.	NTE	ADDI- TIONAL		RATE	ADDI- TIONAL	
	~ 1	Total OF OFR LIGGE		Minus	**		-		FEE			FEE	
		Independent (IV CFR 1.16(b))	•	Minus	•••	•	X 8	- 1	·	OR .	X.8=	1L 1	
	Σŀ		470u os la ana			<u></u>	X \$	==-		OR	x \$		
· }	ــــــــــــــــــــــــــــــــــــــ	FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								OR	+ 5		
.]		file envis	shama 4 to tracke				TOTAL ADD'L			OR ;	TOTAL ADDILFEE		
			dumn 1 is less than fumber Previously					-				institution of pro- contract to the pro- contract to the pro-	
		ner rights!N	lumber Previously	raid For i	n this space b	less than 3, enti	er "3".			i	# ""		

Participation of the second second second second

and the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "righest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "righest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "righest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"The "righest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-600-PTO-9199 and select-option 2.